

# ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

## STANDARD CERTIFICATE OF BIRTH

State File No. 150

Registered No. 255

### 1. PLACE OF BIRTH

County Gila State Arizona

District or Township Here or Village -

City Here No. 358-S. East St. - Ward -

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Baby Brown { If child is not yet named, make supplemental report, as directed.

3. Sex of Child male To be answered ONLY In event of plural births. 4. Twin, triplet or other - 6. Legitimate? yes 7. Date of birth 12-30-1927

5. No., in order of birth - Month - Day - Year -

8. FATHER 14. MOTHER

Full name John Dorthy Brown Full maiden name Mina Willamson

9. Residence (Usual place of abode) 15. Residence (Usual place of abode)

If non-resident, give place and state. 358-S. East If non-resident, give place and state. 358-S. East

10. Color or race White 16. Color or race White

11. Age at last birthday 45 (Years) 17. Age at last birthday 29 (Years)

12. Birthplace (city or place) Anderson 18. Birthplace (city or place) Cripple Creek

(State or country) South Carolina (State or country) Colorado

13. Occupation 19. Occupation

Nature of industry Electrician Nature of industry Housewife

20. Number of children of this mother 2 21. Were precautions taken against ophthalmia neonatorum? yes

(Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living 1 (b) Born alive but now dead 1 (c) Stillborn -

### CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

I hereby certify that I attended the birth of this child, who was born Dec 30 at 6 P. m. on the date above stated

(Born alive or stillborn.)

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature G. E. Wightman, M.D.

(Physician or midwife).

Given name added from Kloke, Arizona

a supplemental report. Month, day, year -

Registrar Jan 3, 1928 L. E. Wightman

Registrar -

025-1230-465